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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being ~~transmitted~~ transmitted to the USPTO (571) 273-2885, on the date indicated below.

MICHAEL R. KRAWZSENEK	(Depositor's name)
<i>Michael R. Krawzsenek</i>	(Signature)
MARCH 4, 2011	(Date)

electronically

32425 7590 12/07/2010
FULBRIGHT & JAWORSKI L.L.P.
600 CONGRESS AVE.
SUITE 2400
AUSTIN, TX 78701

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/579,381

02/06/2007

Guy Cloutier

BRKP022/US

8232

TITLE OF INVENTION: AUTOMATIC MULTI-DIMENSIONAL INTRAVASCULAR ULTRASOUND IMAGE SEGMENTATION METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	03/07/2011

EXAMINER	ART UNIT	CLASS-SUBCLASS
FITZPATRICK, A/TIBA O	2624	382-168000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/147, Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **FULBRIGHT &**
 2 **JAWORSKI L.L.P.**

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

VAL-CHUM, LIMITED PARTNERSHIP**MONTREAL, QUEBEC, CANADA****VALORISATION-RECHERCHE, LIMITED PARTNERSHIP****MONTREAL, QUEBEC, CANADA**Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies

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5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date **MARCH 4, 2011**

Typed or printed name

MICHAEL R. KRAWZSENEKRegistration No. **51,898**

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